

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

101585,961

FILING DATE

7-13-06

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
	1					
2		1				
3		1				
4		1				
5		1				
6	1					
7		1				
8	1					
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10		1				
11		1				
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50						
TOTAL IND.	4					
TOTAL DEP.	7	←		←		←
TOTAL CLAIMS	11					

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
	51					
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99						
100						
TOTAL IND.				↓		
TOTAL DEP.		←		←		←
TOTAL CLAIMS				←		